

Work Order ID 100810

May 1, 2013 7:26:36 AM

\*100810\*

Page 1

Item ID: D2001-4

Accept

\*N900040100\*

Setup Start

\*NS1\*

Revision ID:

Item Name: Valve Assembly (1/4")

Stop

\*NS2\*

Start Date: 4/30/13 Start Qty: 6.00

\*6\*

Cust Item ID:

Required Date: 5/10/13 Req'd Qty: 6.00

\*6\*

Customer:

Reference:

Approvals: Process Plan:

P Date: 13-05-1

Tooling:

Date:

Run Start

\*NR1\*

OC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Work Order ID

Draw Nbr Revision Nbr

Run ID

Tool #

Plan

Code

Qty

Ref

Number

Inspe. Comp.

D2001

Rev C

0.00

13/05/08

6

100

PURCHASING

0.00

\*100\*

Memo

0.00

Issue P/O: 19821

P/N: 76-101-32 (1/4 NPT)

Possible Supplier: Flo-Control Inc.

Material release note is required

110

Receive & Inspect for Damage & Mat'l Certs

0.00

\*110\*

Memo

0.00

Packaging

Ensure Material Release Note is attached

13/05/17

6

120

QC6- Inspect dimensions to drawing

0.00

\*120\*

Memo

0.00

QC

Quality Control

AS  
21  
13/05/17

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____		DISPOSITION		AGAINST DEPARTMENT/PROCESS											
Part No. _____		Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>									
NCR No. _____		Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>									
		Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>									
		Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>										
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector						
Doc/Data															
Equip/Tooling															
Operator															
Material															
Setup															
Other															
Process															
Supplier															
Training															
Unapproved															
FAULT CATEGORY															
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled		<input type="checkbox"/> Other	

Work Order ID 100810

\*100810\*

May 1, 2013 7:26:36 AM

Page 2

Item ID: D2001-4

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Item Name: Valve Assembly (1/4")

Stop

\*NS2\*

Start Date: 4/30/13 Start Qty: 6.00

\*6\*

Cust Item ID:

Required Date: 5/10/13 Req'd Qty: 6.00

\*6\*

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Inspr.  
Stamp

130

\*130\*

Small Fab

Small Fab

0.00

6x

EB/5/22

Small Fab

Memo

0.00

Remove existing ID numbers and replace with Dart P/N & B/N

140

\*140\*

QC

Quality Control

QC5- Inspect part completeness to step on W/O

0.00

AS  
21  
88

BS 22

6

150

\*150\*

Packaging

Identify as per dwg & Stock Location: \_\_\_\_\_

0.00

Memo

0.00

ST002

6x

M. 13/05/22

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____ Part No. _____ NCR No. _____			<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>									
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector		
Doc/Data	<input type="checkbox"/>													
Equip/Tooling	<input type="checkbox"/>													
Operator	<input type="checkbox"/>													
Material	<input type="checkbox"/>													
Setup	<input type="checkbox"/>													
Other	<input type="checkbox"/>													
Process	<input type="checkbox"/>													
Supplier	<input type="checkbox"/>													
Training	<input type="checkbox"/>													
Unapproved	<input type="checkbox"/>													
<b>FAULT CATEGORY</b>														
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube					<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled			

Work Order ID 100810

May 1, 2013 7:26:36 AM

\*100810\*

Page 3

Item ID: D2001-4

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Item Name: Valve Assembly (1/4")

Stop

\*NS2\*

Start Date: 4/30/13 Start Qty: 6.00

\*6\*

Cust Item ID:

Required Date: 5/10/13 Req'd Qty: 6.00

\*6\*

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

160

Operation  
Description

QC21- Final Inspection - Work Order Release

Set Up/  
Run Hours

0.00

Tool ID

Tool #

Plan-  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

\*160\*

QC

Quality Control

Memo

0.00

MLJ 13-05-23

MLJ 13-05-23

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			<b>DISPOSITION</b>		<b>AGAINST DEPARTMENT/PROCESS</b>					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
<b>FAULT CATEGORY</b>										
<b>Landing Gear</b>	<b>General</b>									
	<input type="checkbox"/>	Bending	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced		
	<input type="checkbox"/>	Centre Not Concentric to O/S	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure		
	<input type="checkbox"/>	Cracks	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld		
	<input type="checkbox"/>	Crushed/Crimped	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled		
	<input type="checkbox"/>	Cuffs	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>			
	<input type="checkbox"/>	Heat Treat	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>			
	<input type="checkbox"/>	Inspection Strip in Tube	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>			
	<input type="checkbox"/>	Ripples in Bend	<input type="checkbox"/>	Offset	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	Torque Waves in Extrusion	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>					
	<input type="checkbox"/>	Turning Sequence	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>					
	<input type="checkbox"/>	Wave/Twist in Tube	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>					

# Picklist Print

May 1, 2013 7:26:36 AM

Page 1

Work Order ID: 100810

Parent Item: D2001-4

Parent Item Name: Valve Assembly (1/4")

Start Date: 4/30/13

Required Date: 5/10/13

Start Qty: 6.00

Required Qty: 6.00

Comments: IPP A04.07.06 New Issue KJ/RF

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
76-101-32 VALVE		Purchased		No		110	Each	0.0000	1	6			

13/0/13 6

JK

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## **WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS									
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector						
Doc/Data															
Equip/Tooling															
Operator															
Material															
Setup															
Other															
Process															
Supplier															
Training															
Unapproved															
FAULT CATEGORY															
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled			
														<input type="checkbox"/> Other	

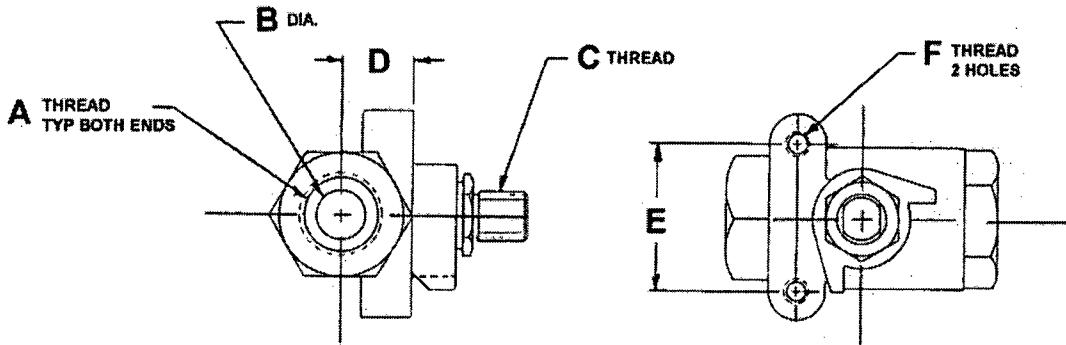
**DART**

DESIGN	DRAWN BY	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
CHECKED	APPROVED	DRAWING NO.	REV. C
		D2001	SHEET 1 OF 1
DATE	TITLE		SCALE
04.07.06	VALVE ASSEMBLY		NTS
-	90.04.02	NEW ISSUE	
A	92.05.12	-043 ADDED	
B	96.04.10	DART P/N CHG, 041-6, 042-12, ADD -16	
C	04.07.06	ADD D2001-4	

RELEASED  
04.09.04

100810  
0/3-05

## SPECIFICATION CONTROL DRAWING



Dart P/N	Apollo P/N	A	B	C	D	E	F
D2001-4	76-101-32	1/4 NPT	0.370	3/8-24 NF	0.56	1.120	10-24 UNC
D2001-6	76-102-01	3/8 NPT	0.370	3/8-24 NF	0.56	1.120	10-24 UNC
D2001-8	76-103-01	1/2 NPT	0.500	3/8-24 NF	0.60	1.120	10-24 UNC
D2001-12	76-104-01	3/4 NPT	0.680	7/16-20 NF	0.79	1.370	10-24 UNC
D2001-16	76-105-01	1 NPT	0.870	7/16-20	0.99	1.370	10-24 UNC

### NOTES:

1) POSSIBLE SUPPLIER: FLO-CONTROL INC. OR APOLLO VALVE DIVISION

2) DISCARD HANDLE AND ATTACHING NUT, EXCEPT FOR D2001-4

3) CHECK DIMENSION SHOWN ON THIS DRAWING

4) REFERENCE INFORMATION:

MATERIAL: 316 STAINLESS STEEL  
INVESTMENT CAST COMPONENTS

MEETS NACE-MR-01-75

MEETS WW-V-35C TYPE II, COMP SS, STYLE 3

PRESSURE RATING: 2000 PSI @ 100°F

150 PSI @ 400°F

5) IDENTIFY WITH DART P/N & B/N USING FINE POINT PERMANENT INK MARKER

Copyright © 1990 by DART AEROSPACE LTD

THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO19821**

Purchase Order Date 5/08/13  
PO Print Date 5/08/13

Page Number 1 of 1

Order From : VU-FL0001

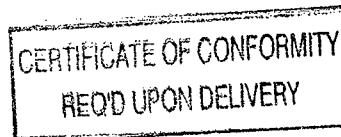
FLO-CONTROL INC.  
80 CENTER RD.  
CARTERSVILLE, GA 30121  
US

Contact Name	Buyer	Chantal Lavoie
Vendor Phone	Requisition Nbr	
Vendor Fax	Tax Resale Nbr	10127-2607
Vendor Account Nbr	Terms	Net 30
	Currency	USD
	FOB	Destination-Collect

Ship To : DART AEROSPACE LTD 1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**FAXED**  
*5/3/13*

Line Nbr	Reference Revision ID	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	76-101-32	VALVE	5/14/13 Yes	6.00 Each	FedEx PI collect	\$52.6100	\$315.66
		<b>Special Inst:</b>	AS PER DWG D2001 REV. C B100810 P/N: 76-101-32 ( 1/4 NPT ) NOTE: C OF C REQUIRED				<i>5/3/13</i>
						PO Total:	\$315.66



*W CL*  
No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required - YES  NO

Change Nbr: 1

Change Date: 5/08/13

Conbraco Industries, Inc.  
701 Matthews Mint Hill Rd.  
Matthews, NC 28105  
(704) 847 - 9191

*Apollo®* Valves  
Manufactured by Conbraco Industries, Inc.



**CONBRACO**

Page: 1

Plt(s) STC Pcs

Sold To: FLO-CONTROL INC 80 CENTER RD  CARTERSVILLE UNITED STATES		Ship To: DART AEROSPACE LTD 1270 ABERDEEN PO#PO19821 HAWKESBURY CANADA			** ORIGINAL **  Pieces: 1 Packed By: BILLB Weight: 3.00 Pack Date: 5/09/13 PPD/COL C Shipped By: SHIPPRF Ship Date: 5/09/13 PRO# ASN# 67075000010326807		
Customer No. 01004667	Cust. Order# 68940	Order No. C175903	Date Received 5/08/13	Salesman 2	Ship Via/Instructions FX01 151793240		
Line Number	Part Number	Part Description		Quantity Ordered	Quantity Shipped	Unit	Customer Part Number/Comments
1000	7613132A	THANKS FOR BUYING AMERICAN!!!! GO DAWGS; BV,1/4"NPT,SS,SS TEE HNDL SHIPPING LOCATION: PAGELAND DISTRICT, 100 CENTER 1418 S. PEARL ST. PAGELAND, NC 28060		6	6	EA	



Manufactured by Conbraco Ind. Inc.

P. O. Box 125 Pageland S.C. 29728

Phone: [843] 672-6161

Fax: [843] 672-1648

[www.apollovalves.com](http://www.apollovalves.com)

## Certificate of Compliance

Customer:	FLO-CONTROL INC		Date:	5/17/2013
CII Order#	C 175903		PO# :	68940
Part # :	Qty:	Description:		
7610132A	6	BV,1/4"NPT,SS,SS TEE HNDL		

This is to certify that the above materials comply with the requirements of the applicable purchase order and the codes and ratings shown in our published catalog of products. All products are manufactured, tested and assembled in the United States of America. All products have met the inspection requirements.

Respectfully,

John C. Regan  
Corporate Quality Assurance Manager

ES-1510 REV. A

